

<h1 style="text-align: center;">TRANSMITTAL FORM</h1> <p style="text-align: center;"><i>(to be used for all correspondence after initial filing)</i></p>	Attorney Docket No.	900/00310 (4020/53)
	Application Number	09/558,232
	Filing Date	APRIL 26, 2000
	First Named Inventor	MANYAK ET AL
	Group Art Unit	2168
	Examiner	CHEYNE D. LY

ENCLOSURES (check all that apply)								
<input type="checkbox"/> Amendment <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Status Letter <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement, PTO-1449, art <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawings: <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> Request for Continued Examination (RCE) Transmittal <input type="checkbox"/> Part B – Issue Fee Transmittal <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request of Refund	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Response to Notification of Non-Compliant Appeal Brief <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Post Card Receipt <input type="checkbox"/> Additional Enclosure(s) (please identify below): <table border="1" style="width: 100%;"> <tr> <td><input type="checkbox"/></td> <td></td> </tr> <tr> <td><input type="checkbox"/></td> <td></td> </tr> <tr> <td><input type="checkbox"/></td> <td></td> </tr> </table>	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	
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<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No. <u>50-1713</u> .								
<input checked="" type="checkbox"/> I hereby petition under 37 CFR § 1.136(a) for any extension of time required to ensure that this paper is timely filed. Please charge any associated fees which have not otherwise been paid to Deposit Account No. <u>50-1713</u> .								

CALCULATION OF FEE

					Small Entity		Large Entity		
	Claims After Amendment		Highest No. Previously Paid For	Present Extra	Rate	Add'l Fee	or	Rate	Add'l Fee
Total		Minus			x \$25=	0		x \$50=	
Indep.		Minus			x \$105=	0		x \$210=	
First Presentation of Multiple Dep. Claim					+\$185=	---		+\$370=	
					total add'l fee	\$ 0		total add'l fee	\$ 0

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm or Individual name	FRANK C. NICHOLAS Registration No. 33,983 Cardinal Law Group 1603 Orrington Avenue, Suite 2000 Evanston, IL 60201		
Signature	/FRANK C. NICHOLAS/	Date:	MAY 1, 2008
CERTIFICATE OF ELECTRONIC SUBMISSION			
I hereby certify that this correspondence is being submitted electronically to the U.S. Patent and Trademark Office on this date:			
			MAY 1, 2008
Signature	/FRANK C. NICHOLAS/ FRANK C. NICHOLAS (33,983)		Date: MAY 1, 2008